Firm Application Checklist Project

Section 232/223(f)

U.S. Department of Housing and Urban Development Office of Healthcare Programs OMB Approval No. 9999-9999 (exp. mm/dd/yyyy)

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Project Number:

Section 232/223(f)

Public reporting burden for this collection of information is estimated to average 1 hour. This includes the time for collecting, reviewing, and reporting the data. The information is being collected to obtain the supportive documentation which must be submitted to HUD for approval, and is necessary to ensure that viable projects are developed and maintained. The Department will use this information to determine if properties meet HUD requirements with respect to development, operation and/or asset management, as well as ensuring the confinued marketability of the properties. Response to this request for information is required in order to receive the benefits to be derived. This agency may not collect this information, and you are not required to complete this form unless it displays a currently valid OMB control number. No confidentiality is assured.

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012: 31 U.S.C. 3729, 3802)

Project Name:

Project Number:

Firm Application Checklist

SUBMISSION REQUIREMENTS:

- Send one electronic (CD, flash drive, etc.) copy of all the documents identified in the table below to Am Welch (Dept of HUD; 909 1st Avenue, Suite 190; Seattle, WA 98104 1000). the assigned OHP staff member identified by HUD in Email Blast for receipt of the Firm Application submission.
- OHCFOHP will email you with the instructions for sending hard copies—see Email Blast dated 1/15/2010.

Per 9/18/09 Email Blast, one hard copy of the following documents will be sent directly to the HUD Closing nstructions for such will be included in the email from OIHCF

Copy of Email from OIHCF Underwriter that lists the documents

- Underwriting Narrative (Exhibit 1-2)
- Contact List (Exhibit 1-8)
- Organizational Docs of Mortgagor (Exhibits 3 1 & 3 2).
 Organizational Docs for principals of Mortgagor (if applicable) (Exhibits 4 1 & 4 2)
- Organizational Docs of Operator/Lessee (Exhibits 5 1 & 5 2)
- Operator Lease, Memorandum of Lease, & Estoppel Certificate, (if applicable) (Exhibit 5-11)
- Master Lease (if applicable) (Exhibit 5-12)
- Organizational Docs of Parent of Operator (if applicable) (Exhibits 6-1 & 6-2)
- Organizational Docs of Management Agent (if applicable) (Exhibits 7-1 & 7-2)
- 10. Licenses (Exhibit 8 2)
- Title (Exhibit 8-3)
- 12. Survey (Exhibit 8-4) (full size)
- 14. Commercial Leases (if applicable) (Exhibit 8 8)
- Ground Lease (if applicable) (Exhibit 8-9)
- 16. Accounts Receivable Documents (if applicable) (Exhibit 9-12)

PORTFOLIOS: On portfolios being submitted and reviewed in underwriting by HUD at relatively the same time, the portions of Sections 4, 5, 6, 7, 10, 12, and 13 (as applicable) that are the same across all or a batch of projects may be submitted in one (or more) Master Mortgage Credit submission(s).

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	Item	N/A	Incl.	
	tion 1: Underwriting			
1-1.	A. Check ¹ – FHA Application Fee (0.3% of Mortgage Amount)			Formatted Table
	B. Check Transmittal Letter			
	C. Completed Firm Application Checklist			
	C.D. Certification for Electronic Submittal Document			
1-2.	A. Lender's Underwriting Narrative ² (Submit electronic version as a pdf and as a Word			
	document)			
	B. Completed Risk Assessment Worksheet (Submit only electronic- Excel Spreadsheet)			
1-3.	HUD Underwriting Forms (signed and dated by the Lender)			
	A. HUD 92264 HCF, Health Care Summary Appraisal Report			
	B.A. HUD-92264-T, Rent Estimates for Low/Moderate Income Units (if applicable)			
	C.—HUD-92264-A, Supplement to Project Analysis			
	1. Format for Computing Fees in a Refinance or Purchase Transaction			
	2. Format for Computing Operating Deficit		H	
	3. Criterion 11, Amount based on Deduction of Grant(s), Loan(s) and Gift(s) (if applicable) D.B. Maximum Amount Permitted to be Financed Through Promissory Notes (if applicable)			
4.4	Firm Commitment (DRAFT) with Special Conditions (Submit electronic version as a Word		H	
1-4.	document)		H	
	(Note: "Exhibit A", Exhibit B", etc. must be displayed on the top of each exhibit to the		ᅢ	
	Firm Commitment)		ш	
	A. Exhibit A, Legal Description			
	B. Exhibit B, Replacement Reserve Schedule (include the Replacement Reserve Schedule from	П		
	the Narrative <u>and</u> the Realty and Non-Realty Replacement Reserve Analysis completed by the PCNA		ш	
	contractor)			
	C.—Exhibit C, List of Required Repairs (if applicable)			
	D.C. (Note: "Exhibit A", Exhibit B", etc. must be displayed on the top of the document)			
1-5 .	HUD 92329, Property Insurance Schedule (signed and dated by the Lender)		Н	
1-6. 1	Property Insurance Requirements		_	Formatted Table
	A. HUD-92447, Property Insurance Requirements			
	Update and Additional Property Insurance Requirements (Appendix 2, H 01-03)		Щ	
_	Lender's Consolidated Certification		Щ	
	Contact List		Ш	
1-9.	BPRS (only required for paper 2530 submissions): Verification that all applicable participants			
	have compeleted their registration in the Business Partners Registration System	 		
	(http://www.hud.gov/offices/hsg/mfh/apps/appsmfhm.cfm)			
	Copies of any email guidance provided by HUD on this project before the submittal.	Щ	Щ	
	Copy of previously signed HUD 2 (waiver form) and/or draft HUD 2.	Щ	Щ	
	Portfolio Approval Letter and attachments ³	Ш	Ш	
	tion 2: Third Party Reports ⁴	ĺ		
	Appraisal		Ш	
2-2.	Environmental			
	A. Phase I Environmental Report		H	
	B. Phase II Environmental Report (if applicable)C. Operations & Maintenance Plan - Asbestos (if applicable)		니님ㅣ	
2.2	Project Capital Needs Assessment (PCNA) (also provide any required specialty reports)		H	
	tion 3: Mortgagor			
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No.	Item	N/A	Incl.	
3-1.	Organizational Chart			
3-2.	Organizational Documents			
	A. Corporate	П	П	
	Articles of Incorporation			
	2. Bylaws			
	3. Authorizing Resolutions			
	B. Partnership			
	Partnership Agreement			
	2. Certificate of Partnership		Ц	
	3. Authorizing Resolutions		닏	
	C. Limited Liability Company	Ш		
	1. Articles of Organization		닏	
	2. Operating Agreement		\vdash	
	3. Authorizing Resolutions		Ш	
3-3.	Nonprofit Mortgagor ⁵			
	A. HUD-3433, Eligibility as a Nonprofit		\exists	
	B. Detailed explanation of motivations for project		\Box	
3-4. <u>3</u>	2530/APPS-Certification:		•	Formatted Table
	A. <u>Paper 2530:</u>			
	1. Completed Paper HUD-2530 (with documentation for signature authority to			
	sign for the entity & if applicable, with documentation for signature authority to	Ш	Ш	
	sign for other principals with same participation) OR			
	2. Evidence of registration in HUD's Business Partners Registration System –			
	required for all applicable participants.	Ш	Ш	
	(http://www.hud.gov/offices/hsg/mfh/apps/appsmfhm.cfm)			
	OR			
	B. <u>APPS Submittal:</u> APPS Certification (with documentation for signature authority to			
	sign for the entity & if applicable, with documentation for signature authority to sign for	Ш	Ш	
	other principals with same participation)			
	Mortgagor's Consolidated Certification		Щ	
	Credit Report		Ш	
3-7. <u>3</u>	Financial Statements – Year-to-Date ⁶		[Formatted Table
	A. Balance Sheet			
	1. Aging of Accounts Receivable	lН	\vdash	
	2. Aging of Notes Receivable	H	님	
	Schedule of Pledged Assets Schedule of Marketable Securities	H	H	
	Schedule of Marketable Securities Schedule of Accounts Payable	ΙH	\forall	
	Schedule of Accounts r ayable Schedule of Notes and Mortgages Payable	lΗ	H	
	7. Schedule of Legal Proceedings	ΙН		
	B. Income and Expense Statement		H	
	C. Financial Statement Certification ²		Ħ	
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No.	Item	N/A	Incl.	
3-8.3	Financial Statements – FY 20 <u>XX</u> ⁸			
	A. Balance Sheet			
	Aging of Accounts Receivable			
	2. Aging of Notes Receivable			
	3. Schedule of Pledged Assets			
	Schedule of Marketable Securities			
	5. Schedule of Accounts Payable		lΠ	
	6. Schedule of Notes and Mortgages Payable			
	7. Schedule of Legal Proceedings			
	B. Income and Expense Statement			
	C. Financial Statement Certification ⁶			
202	Financial Statements – FY 20XX ² 20XX ⁶			-
3-3. <u>3</u>	A. Balance Sheet			
	1. Aging of Accounts Receivable		H	
	2. Aging of Notes Receivable		H	
	3. Schedule of Pledged Assets		\parallel	
	4. Schedule of Marketable Securities		H	
	5. Schedule of Accounts Payable		\parallel	
	6. Schedule of Notes and Mortgages Payable		H	
	7. Schedule of Legal Proceedings		\square	
	B. Income and Expense Statement			
	C. Financial Statement Certification ⁶		Ш	
3-10.	Financial Statements – FY 20XX ² 20XX ⁶		4	Formatted Table
	A. Balance Sheet			
	Aging of Accounts Receivable			
	2. Aging of Notes Receivable			
	3. Schedule of Pledged Assets			
	Schedule of Marketable Securities			
	5. Schedule of Accounts Payable			
	6. Schedule of Notes and Mortgages Payable			
	7. Schedule of Legal Proceedings			
	B. Income and Expense Statement			
	C. Financial Statement Certification ⁶			
Sec	tion 4: Principal of Mortgagor—(complete for each principal) ⁹			
4-1.	Organizational Chart (if applicable)			
	<u> </u>		Ш	-
4-2.	Organizational Documents (if applicable)			
	A. Corporate			
	1. Articles of Incorporation		\parallel	
	2. Bylaws		\parallel	
	3. Authorizing Resolutions		\parallel	
	B. Partnership			
	Partnership Agreement		\square	
	2. Certificate of Partnership		\square	
	3. Authorizing Resolutions		\square	
	C. Limited Liability Company			
	1. Articles of Organization			
	2. Operating Agreement		\Box	
	3. Authorizing Resolutions			Formatted Table
4-3.	Resume'/Resume'/Evidence that individual or entity is qualified			Field Code Changed
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No.	Item	N/A	Incl.	
4-4.	2530/APPS-Certification:			
	A. Paper 2530:			
	1. Completed Paper HUD-2530 (with documentation for signature authority to			
	sign for the entity & if applicable, with documentation for signature authority to			
	sign for other principals with same participation) - OR	ш		
	2. Evidence of registration in HUD's Business Partners Registration System –			
	required for all applicable participants.	ш	ш	
	(http://www.hud.gov/offices/hsg/mfh/apps/appsmfhm.cfm)			
	<u>OR</u>			
	B. <u>APPS Submittal:</u> APPS Certification (with documentation for signature authority to	_	_	
	sign for the entity & if applicable, with documentation for signature authority to sign for	ш	Ш	
	other principals with same participation)			
4-5.	Principal of Mortgagor Consolidated Certification			
4-6.	Credit Report			
	A. Principal of Mortgagor ¹⁰		П	
	B. Sampling of Principal's Other Business Concerns (from list attached to Consolidated Certification)		Ħ	
Sec	tion 5: Operator (Lessee) - !!		-	Formatted Table
	Organizational Chart			Torniacted Table
		ш	Ш	
5-2.	Organizational Documents			
	A. Corporate	ΙШ		
	Articles of Incorporation			
	2. Bylaws			
	3. Authorizing Resolutions			
	B. Partnership	ш		
	Partnership Agreement			
	2. Certificate of Partnership			
	3. Authorizing Resolutions	_		
	C. Limited Liability Company			
	Articles of Organization			
	2. Operating Agreement		Ш	
	3. Authorizing Resolutions		Ш	
5-3.	A. Resume'			
	A. Resume'/ Evidence that individual or entity is qualified			
	B. Schedule of Facilities Owned, Operated or Managed	_		
5-4.	2530/APPS-Certification:			
J 1 .	A. Paper 2530:			
	1. Completed Paper HUD-2530 (with documentation for signature authority to			
	sign for the entity & if applicable, with documentation for signature authority to	ш	ш	
	sign for other principals with same participation) OR			
	2. Evidence of registration in HUD's Business Partners Registration System –			
	required for all applicable participants.	ш	Ш	
	(http://www.hud.gov/offices/hsg/mfh/apps/appsmfhm.cfm)			
	<u>OR</u>			
	B. APPS Submittal: APPS Certification (with documentation for signature authority to			
	sign for the entity & if applicable, with documentation for signature authority to sign for			
	other principals with same participation)			
5-5.	Operator's Consolidated Certification			
	operator o componiumou continuumon	1		Field Code Changed
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No.	Item	N/A	Incl.
5-6.	Credit Report		
	A. Operator (Lessee)		П
	B. Sampling of Operator's Other Business Concerns (from list attached to Consolidated		
	Certification)	_	_
	C. Senior officers of the operator		П
	B.D. Any stockholder with a 25 percent or more interest in the operator		
5-7.	Financial Statements – Year-to-Date ⁶		
	A. Balance Sheet		
	Aging of Accounts Receivable	ΙШ	
	2. Aging of Notes Receivable		
	3. Schedule of Pledged Assets	Щ	
	4. Schedule of Marketable Securities	Ш	
	5. Schedule of Accounts Payable		
	6. Schedule of Notes and Mortgages Payable		
	7. Schedule of Legal Proceedings	ΙШ	Ш
	B. Income and Expense Statement		Ш
	C. Financial Statement Certification 6		Ш
5-8.	Financial Statements – FY 20XX ² 20XX ⁶		
	A. Balance Sheet		П
	Aging of Accounts Receivable		\Box
	2. Aging of Notes Receivable		
	3. Schedule of Pledged Assets		
	4. Schedule of Marketable Securities		
	5. Schedule of Accounts Payable		
	6. Schedule of Notes and Mortgages Payable		
	7. Schedule of Legal Proceedings		
	B. Income and Expense Statement		
	C. Financial Statement Certification ⁶		
5-9.	Financial Statements – FY 20XX ⁷ 20XX ⁶		
	A. Balance Sheet		П
	Aging of Accounts Receivable		
	2. Aging of Notes Receivable		
	3. Schedule of Pledged Assets		
	4. Schedule of Marketable Securities		
	5. Schedule of Accounts Payable		
	6. Schedule of Notes and Mortgages Payable		
	7. Schedule of Legal Proceedings		
	B. Income and Expense Statement		
	C. Financial Statement Certification ⁶		

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No.	Item	N/A	Incl.	
5-10.	Financial Statements – FY 20XX ² 20XX ⁶			
	A. Balance Sheet			
	Aging of Accounts Receivable			
	2. Aging of Notes Receivable			
	3. Schedule of Pledged Assets			
	4. Schedule of Marketable Securities			
	5. Schedule of Accounts Payable			
	6. Schedule of Notes and Mortgages Payable			
	7. Schedule of Legal Proceedings	Ш		
	B. Income and Expense Statement			
	C. Financial Statement Certification ⁶			
5-11.	Operating Lease	\Box	\Box	
	A. Master Operating Lease (with HUD Addendum) Only Applies to Portfolios	П	Ī.	Formatted Table
	B. Sublease		H	
	C. Draft HUD Master Memorandum of Lease SNDA or		H	
	C. Subordination, Non-Disturbance & Attornment Agreement (SNDA) (if applicable for			
	non-related owner and operator)			
	D. Draft HUD amendment to Operator LEAN Rider to Regulatory Agreement Estoppel		ш	
	Certification			
Soci	ion 6: Parent of Operator– ¹²			
	Organizational Chart			
			Ш	
6-2.	Organizational Documents			
	A. Corporate	ш	닏	
	Articles of Incorporation		ᅵ႘ᅵ	
	2. Bylaws		ᅵ႘	
	3. Authorizing Resolutions		ᅵ႘ᅵ	
	B. Partnership	ш	$ \; \vdash \; $	
	1. Partnership Agreement		ᅵ႘ᅵ	
	2. Certificate of Partnership		님님	
	3. Authorizing Resolutions		ᅵ႘ᅵ	
	C. Limited Liability Company	ш	님	
	1. Articles of Organization		님님	
	2. Operating Agreement		$ $ \vdash $ $	
	3. Authorizing Resolutions		Ш	
6-3.	A. Resume'			Formatted Table
	A. Resume'/ Evidence that individual or entity is qualified			
	B. Schedule of Facilities Owned, Operated or Managed			
6-4.	NOT APPLICABLE 2530's APPS Not Applicable to Parent of Operator	\boxtimes		
6-5.	Parent of Operator's Consolidated Certification			
6-6.	Credit Report			
	A. Parent of Operator			
	B. Sampling of Parent of Operator's Other Business Concerns (from list attached to			
	Consolidated Certification)			
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o. Item	N/A	Incl.	
7. Financial Statements – Year-to-Date ⁵			
A. Balance Sheet			
Aging of Accounts Receivable			
2. Aging of Notes Receivable			
3. Schedule of Pledged Assets			
4. Schedule of Marketable Securities			
5. Schedule of Accounts Payable			
6. Schedule of Notes and Mortgages Payable			
7. Schedule of Legal Proceedings			
B. Income and Expense Statement			
C. Financial Statement Certification ⁶		\sqcap	
8. Financial Statements – FY $\frac{20XX^2}{20XX^6}$			
A. Balance Sheet			
		님	
Aging of Accounts Receivable Aging of Notes Reseivable		HI	
Aging of Notes Receivable Schedule of Pledged Assets		HI	
4. Schedule of Marketable Securities		H	
5. Schedule of Accounts Payable		Ħ	
6. Schedule of Notes and Mortgages Payable		Ħ	
		Ħ	
7. Schedule of Legal Proceedings		Ħ	
B. Income and Expense Statement		\exists	
C. Financial Statement Certification ⁶		Ш	
Financial Statements – FY $\frac{20XX}{20XX}$			
A. Balance Sheet			
1. Aging of Accounts Receivable			
2. Aging of Notes Receivable			
3. Schedule of Pledged Assets	- ₩		
4. Schedule of Marketable Securities	- ₩		
5. Schedule of Accounts Payable			
6. Schedule of Notes and Mortgages Payable			
7. Schedule of Legal Proceedings	₩		
B. Income and Expense Statement		\Box	
C. Financial Statement Certification ⁶			
10. Financial Statements – FY 20XX ² 20XX ⁶			
A. Balance Sheet			
Aging of Accounts Receivable		Ħl	
2. Aging of Notes Receivable		ĦI	
3. Schedule of Pledged Assets		HI	
4. Schedule of Marketable Securities		H	
5. Schedule of Accounts Payable		日日	
6. Schedule of Notes and Mortgages Payable		吕	
7. Schedule of Legal Proceedings		日日	
B. Income and Expense Statement		吕	
C. Financial Statement Certification ⁶		=	
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ection 7: Management Agent ¹³			Formatted Table
1. Organizational Chart (if applicable – per footnote to this entire section)			
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No.	Item	N/A	Incl.	
7-2.	Organizational Documents (if applicable – per footnote to this entire section)			
	A. Corporate			
	1. Articles of Incorporation		Щ	
	2. Bylaws		Ц	
	3. Authorizing Resolutions		Ш	
	B. Partnership	Ш		
	Partnership Agreement		H	
	2. Certificate of Partnership		H	
	3. Authorizing Resolutions		ш	
	C. Limited Liability Company		П	
	1. Articles of Organization		H	
	2. Operating Agreement		H	
	3. Authorizing Resolutions			
7-3.	HUD Management Forms			Formatted Table
	A. HUD 9832, Management Entity Profile			
	B. Certifications			
	1. HUD 9839 A, Project Owner's Certification for Owner Managed Projects			
	2. HUD 9839 B, Project Owner's/Management Agent's Certification for Identity of		\vdash	
	Interest or Independent Management Agents HUD 9839 C, Project Owner's/Borrower's Certification for Elderly Housing Projects Managed			
	HUD 9839 C, Project Owner's/Borrower's Certification for Elderly Housing Projects Managed		\Box	
	by Administrators Form (if applicable – per footnote to this entire section)			
7-4.	Management Agreement	Ш		
7-5.	A. Resume'	_		
	A. Resume'/ Evidence that individual or entity is qualified	Ш		
	B. Schedule of Facilities Owned, Operated or Managed			
7-6.	2530/APPS Certification:			
	A. Paper 2530:			
	1. Completed Paper HUD-2530 (with documentation for signature authority to			
	sign for the entity & if applicable, with documentation for signature authority to			
	sign for other principals with same participation) -OR			
	2. Evidence of registration in HUD's Business Partners Registration System –			
	required for all applicable participants.			
	(http://www.hud.gov/offices/hsg/mfh/apps/appsmfhm.cfm)			
	OR			
	B. APPS Submittal: APPS Certification (with documentation for signature authority to			
	sign for the entity & if applicable, with documentation for signature authority to sign for			
	other principals with same participation)			
7-7	Management Agent's Consolidated Certification ¹⁴			
			1	
	Credit Report			
Sec	ion 8: Real Estate			

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No.	Item	N/A	Incl.	
8-1.	A. Refinance		•	Formatted Table
	Certification of Outstanding Obligations			
	2. Pay-off Statement for each obligation			
	3. Replacement Reserve Balance confirmation (if applicable)			
	4. HUD Prepayment Authorization Letter ¹⁵ (if applicable)			
	5. Copy of all outstanding notes.			
	B. Purchase			
	Purchase contract and amendments, OR			
	Option Agreement			
8-2.	Licenses			
	A. Certificate of Need (if applicable)			
	B. Facility (if applicable)		IП	
	C. Operator (Lessee) or Management Agent (if applicable)	ΙĦ	IП	
8-3.	Title			
0 0.	A. Preliminary Title Report		ΙП	
	B. Pro Forma – 2006 ALTA Title Insurance Policy		H	
	ALTA Form Environmental Endorsement			
	ALTA Form Comprehensive Endorsement ALTA Form Comprehensive Endorsement		lΗ	
	ALTA Form Endorsement deleting Arbitration Clause		H	
	ALTA Location of Improvements Endorsement		lН	
	C. Exception Documents		ΙĦ	
8-4.	ALTA/ACSM Land Title Survey (Submit 2 full size surveys completed according to the		Ħ	Formatted Table
0-4.	Lean-Survey Instructions: & Owner's Certification. One for the HUD Underwriter and			Torridated Tubic
	one for the HUD Closing Attorney)			
8-5.	Evidence of compliance			-
8-5.				
	A. Zoning		H	
	B. Building Codes		\parallel	
	C. C. Verification of Zoning and Code Variances (if applicable)		Щ	
	Medicare and Medicaid Programs; Fire Safety Requirements for Long Term Care	🖶	🖶	
	Facilities, Automatic Sprinkler Systems			
8-6.	Municipal inspection reports		_	
	A. Fire Marshal		Ш	
	B. State Health Department (if applicable)		Ш	
	C. Verification that health standards are met for private sewer or water systems.		Ш	
8-7.	Relocation plan during repairs (if applicable)			
8-8.	Commercial leases (if applicable)			
8-9.	Land Lease (Ground Lease) including HUD requirements/provisions outlined in FHA			Formatted Table
	Form 2070 (if applicable)			
8-10.	Real Estate Tax Abatement/Exemption (if applicable)			
	A. Evidence of abatement or exemption		П	
	B. Form FHA-1708, Agreement for Payment of Real Property Taxes		ΙĦ	
	D. Torm Time 1700, regreement for Layment of Real Property Taxes		ш	J
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No.	Item	N/A	Incl.	
8-11.	Floodplain ¹⁶			
	A. Evidence of participation in an early warning system			
	B. Emergency evacuation and relocation plan			
	C. Identification of evacuation route(s) out of the 500-year floodplain			
	D. Identification marks of past or estimated flood levels on all structures			
	E. Evidence that current or prospective tenants have been or will be informed of the			
	flood hazard.			
8-12.	State Historic Preservation Office letter/requirements (if applicable)			
Sec	tion 9: Operations		•	
9-1.	Operating budget (12-months, including census mix and occupancy assumptions)			
9-2.	Staffing sehedule (including job titles, salaries, and full time equivalents (FTE))This			Formatted Table
	section intentionally left blank		_	
9-3.	Financial Statements for Operation ¹⁷ – Year-to-Date ⁵			
	A. Balance Sheet			
	Aging of Accounts Receivable			
	2. Aging of Notes Receivable			
	3. Schedule of Pledged Assets			
	4. Schedule of Marketable Securities			
	Schedule of Accounts Payable			
	6. Schedule of Notes and Mortgages Payable		l ∐ l	
	7. Schedule of Legal Proceedings	Ш	ᅵ닏ㅣ	
	B. Income and Expense Statement		ᅵ닏ㅣ	
	C. Financial Statement Certification ⁶		Ш	
9-4.	Financial Statements for Operation 13 Operation 16 - FY 20XX 20XX 20XX 6/18	Ш		
	A. Balance Sheet		Ш	
	B. Income and Expense Statement		l ∐ l	
	C. Financial Statement Certification ⁶		Ш	
9-5.	Financial Statements for Operation 13 Operation 16 - FY 20XX 7/14 20XX 6/17	Ш		
	A. Balance Sheet			
	B. Income and Expense Statement		ш	
	C. Financial Statement Certification ⁶		Ш	
9-6.	Financial Statements for Operation 13 Operation 16 - FY 20XX 7/14 20XX 6/17	Ш		
	A. Balance Sheet		Ш	
	B. Income and Expense Statement		Ш	
	C. Financial Statement Certification ⁶		Ш	
9-7.	Census history, by month and payment source			
	A. Year-to-date		l ∐ l	
	B. FY 20 <u>XX</u>			
	C. FY 20 <u>XX</u>			
	D. FY 20 <u>XX</u>		Ш	
9-8.	Reimbursement			
	A. Resource Utilization Group (RUG) census data for last 12-months, including HUD	Ш		
	Certification & Warning. Note: Certification & Warning must be signed and dated by the			
	borrower/operator. (SN Only)			
	B. Evidence of Medicaid Rate (if applicable)			
9-9.	Rent rolls ¹⁹ , last 3 months, including HUD certification and warning (<i>Note: Certification &</i>			
	Warning must be signed and dated by the borrower/operator.) (ALF/B&C Only)			Field Code Changed
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9-1	D. State licensing inspection reports for last 3-years/last 3 inspections inspections				_	 Formatted Table
9-1	I. Facility Administrator					
	A. Resume'					
	B. License (if applicable)			ΙĒ	╗	
9-1	2. Account receivable (A/R) financing documentation				4	 Formatted Table
	A. Revolving Loan Note	ľ	_	[1	
	B. Loan Example of Resident Care and/or Rental Agreement			۱Ē	4	
	C. Lessee Security Agreement			۱Ē	Ξ.	
	D. UCC-1 Filings (all)			۱Ē	Ξ.	
	E. Guarantees (if applicable)			ΙĒ	ゴ	
	F. Intercreditor Agreement (ICA) between A/R Lender and FHA Lender			۱Ē	\$	
	G. HUD Rider to Intercreditor Agreement			۱Ē	ゴ	
	H. Deposit Control Agreement			۱Ē		
	I. Lock box Agreement or equivalent control agreement			ΙĖ	ゴ	
	J. Draft Mortgagor Attorney's Opinion			۱Ė	=	
	K. Draft Operator/Lessee Regulatory Agreement			ΙĖ	=	
	L. Rider including all required A/R Conditions			ΙĖ	=	
	Accounts Receivable Financing Certifications (Format posted to HUD.GOV)(s) for the				┪	
	facility.			-		
0.4	3. Example of Resident Care and/or Rental Agreement(s) for the facility.			+	_	
9-1	4. Example of Provider Agreement(s) for the facility.	1		╁╞	=	Formatted Table
	ction 10: Professional Liability Insurance (PLI) ²⁰	<u> </u>		<u> </u>		Formatted Table
36	1. Schedule of Facilities Covered by PLI Policy. Information on the PLI provider:					
10-		Г	_	۱,	_	Formatted Table
	A. Copy of each insurance carrier's license – showing the name of insurance carrier	ļ	+		=	
l	B. Evidence of insurance company(s) rating (Print-out from AM Best Rating or other)	H	+	₽₽	4	
<u>10-</u>	Limits of coverage and list of facilities (including bed counts) included under this	1		L		
	coverage.			 	_	
10-	State licensing inspection reports—for facilities identified on insured's Schedule surveys shall be			L		Formatted Table
	transmitted as part of Facilities Owned, Operated or Managed. Lender must submit copies of					
	inspection reports for the application for the last three years of all individual facilities of					
	the operator if the operator has less than five facilities that have open level "G" or higher					
	citations/deficiencies. The Lender must address any issues/risks associated to determine the					
	quality of care provided by the operator. If the operator has five or more facilities,					
	complete copies of state licensing surveys for all facilities with the reports and show how					
	they would be mitigated. If no open/serious unresolved level G or higher deficiencies					
	(deficiencies, where there is actual harm to residents commonly referred to as "G" or					
	higher level deficiencies) shall be transmitted if this should be stated. Note: deficiency has					
	not been removed within a one month period. If any facility has recent (within the last 2					
	years) resolved "G" or higher citations/deficiencies, the Lender must address this in the					
	Narrative, however, a copy of the submit the inspection report is not required. Please					
	provide a narrative discussion regarding the topic, the risk and how it will be mitigated.					
	3. Loss history					
	1. Potential claims certification			ĦĒ		
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	Item	N/A	Inc			
10-5.	Evidence of PLI coverage for statute of limitations period (provide documentation from			+	Formatted Table	
	the state which shows statute of limitation period) The operator or its parent operator					
	must submit a six-year loss history of professional liability claims filed against it for all					
	facilities controlled by the operator or parent operator. The six-year loss history should					
	be provided in annual summary form (prepared by the insurance company or third-					
	party administrator) and should:					
	 Provide a current inventory of all paid or settled claims; 					
	Break out the expected cost of claims in a year by year summary. In separate line					
	items, list the amount of the actual and/or anticipated awards, claims expenses, and					
	any funds reserved for estimated claims;					
	 List total actual or estimated claims costs for compensatory damages, medical 					
	expenses, punitive damages and legal expenses incurred processing the claim;					
	 Identify potential or expected professional liability claims in excess of \$10,000 that 					
	have been or may be filed for all periods within the statute of limitations for the					
	State where the claim occurred;					
	• Include a brief discussion or chart that provides the timeframe for the statutes of					
	limitations for filing claims of negligence, injuries, wrongful death, and/or					
	improper care based-the law in the states where the parent operator's facilities are					
	<u>located.</u>					
	• Include a certification from the parent operator (operator – if no parent) as to the					
	accuracy of this documentation. The certification must be signed, and dated by a					
	senior officer of the parent operator (operator - if no parent), and include the					
	following statement:					
	"HUD will prosecute false claims and statements. Convictions may result in					
	criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729,					
	<u>3802)"</u>					
	Evidence of current PLI cost	Ш				
10-7 .	Evidence of Insurer's Rating (Print-out from Best Rating or Insurer's signed opinion)					
10-8.	Actuarial study, most recent 2422 (if applicable)			•	Formatted Table)
	Note: This information is considered proprietary and is exempt from Freedom of					
	Information Act requests.					
	ion 11: Additional Funding Sources					
11-1.	Grants Grant and/or Secondary Financing Loan		_			
	Commitment letter (specifying amount, intended use, conditions) Documents		L			
11-2.	Bond Financing		_			
	• Itemized costs of issuance, discounts and financing fees to be paid out of pocket by					
	mortgagor and explanation regarding the necessity of each cost.					

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Firm Application Checklist

No.	Item	N/A	Incl.
11-3.	Tax Credits		
	A. Letter of commitment from tax credit syndicator or investor (specifying equity		
	amount and pay-in schedule)		
	B. Acknowledgment/Release (Addendum 9 of HUD Notice H 95-4)		
	C. Reservation, executed copy		
	D. Source and Use Statement (Addendum 4 of HUD Notice H 95-4)		
	E. HUD-2880, Applicant/Recipient Disclosure/Update Report		
	F. F. Bridge Loan agreements		
	Subsidy layering review (if applicable)		
Sect	tion 12: Accounts Receivable Financing Documents		
<u>12-1</u>	Revolving Loan Note		
<u>12-2</u>	AR Loan Agreement and All Amendments		
<u>12-3</u>	Lessee Security Agreement with FHA Lender		
<u>12-4</u>	UCC-1 Filings and UCC Searches (all)		
<u>12-5</u>	Guarantees (if applicable)		
<u>12-6</u>	Cash Flow Chart		
12-7	Intercreditor Agreement (ICA) between A/R Lender and FHA Lender		
12-8	HUD Rider to Intercreditor Agreement		
12-9	AR Lender Lock-box Agreement or equivalent control agreement		
12-10	Accounts Receivable Financing Certifications (Format posted to HUD.GOV)		
12-11	Security Agreement with AR Lender and Amendments		
Sect	ion 13: Master Lease Documents 23		
13-1	Master Lease Documents		
	A. Master Lease (with HUD Addendum)		
	B. Sublease		
	C. HUD Master Lease SNDA or Subordination Agreement (if related owner and		
	operator)		
	D. Cross Default Guarantee of Sub-Tenants		
<u>13-2</u>	2530/APPS on the Master Tenant:		
	A. Paper 2530:		
	1. Completed Paper HUD-2530 (with documentation for signature authority to		_
	sign for the entity & if applicable, with documentation for signature authority to	Ш	Ш
	sign for other principals with same participation)		
	2. Evidence of registration in HUD's Business Partners Registration System –		_
	required for all applicable participants.	Ш	Ш
	(http://www.hud.gov/offices/hsg/mfh/apps/appsmfhm.cfm)		
	<u>OR</u>		
	B. APPS Submittal: APPS Certification (with documentation for signature authority to		
	sign for the entity & if applicable, with documentation for signature authority to sign	Ш	$ \sqcup $
	for other principals with same participation)		

1	 Please have check 	include reference t	o project name	location r	nortagago numbor	and nur	noco EUA	application for
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- 2 Lender shall not make any alterations to the narrative format. If a particular section does not apply within the narrative, it should specifically be noted as NOT APPLICABLE.
- 3 Applies to Mid-Sized or Large-Sized Portfolios
- 4 All third party reports must be submitted within 180 days of the date of inspection.
- 5 Nonprofit Mortgagor documentation only required when the nonprofit loan constraints are used.
- 6 Year-to-date statements: No more than 3 months can have expired since the closing date of the latest unaudited statement. No more than 6 months can have passed since the statements were audited by a CPA/IPA.
- 7—Audited financial statements are preferred but owner-prepared statements will be accepted. All financial statements, audited and owner-prepared, will need to be certified by the entity with signature authority for that financial statement.
- 8 Fill in the Year. Business entities must submit this exhibit for the lesser of the last 3 years or the length of existence. Audited financial statements are preferred but owner-prepared statements will be accepted. All financial statements, audited and owner-prepared, will need to be certified by the entity with signature authority for that financial statement.
- 9 Submit documents for each entitiy in the mortgagor's signature block
- 10 If a principal is a business entity (i.e. corporation, partnership) with an operating history, a credit report will be required only on the business firm, not the owners of the firm.
- 11 Submit documents for each entity in the operator's signature block
- 12 Submit documents for each entity in the Parent of Operator's signature block.

13 - See Matrix below to determine which items in this Section need to be provided with the application:

Scenario #	Description of Participant Roles	Note	Checklist Items to complete
1	Mortgagor is Owner/Operator. One entity		Nothing from Section 7
2	Mortgagor has a Management Agent		All of Section 7
3	Mortgagor owns building and land, and leases to Operator who holds the license. There is no Management Agent.		Nothing from Section 7
4	Mortgagor owns building and land, and leases to Operator. There is also a Management Agent.		7-4; 7-5; 7-6; 7-7; 7-8

- 14 This consolidated certification is in addition to the form HUD-9839.
- 15 For mortgages currently insured by HUD, prepayment approval must be obtained from HUD prior to submission of the application.
- 16 Floodplain information is only required if the property is located in a 100- or 500-year floodplain.
- 17 Operating Financial Statements provided here should pertain only to the operation of the subject facility.
- 18 In circumstances beyond the mortgagor's control where the required financial statements are not available, the mortgagor must submit: (a) Evidencea satisfactory explanation as to the Lender that why the financial statements are not obtainable; and (b) The project financial statements that are available including an owner certified balance sheet and operating statement. The Lender's case file must contain a statement from the mortgagor that explains why all the required records are not obtainable and a memorandum from the Lender to Roger E. Miller, Director, Office of Insured Health Care Facilities (OHICF) stating that he/she has evaluated the mortgagor's statement and agrees that the information is not available. In these situations, a HUD 2 Waiver form is required include a draft in Exhibit 1-09 of the Firm Application package.
- 19 Rent roll data will include room number, room type (studio, one bedroom, etc.), occupancy status (occupied/unoccupied), and rental rate.
- 20 Professional liability insurance documentation requirements only apply to the insured party providing the coverage and exclude additional named insured parties.
- 21 Actuarial study only required if the Insured participates in more than 50 healthcare facilities.
- 22 Actuarial study required if the entity utilizes self-insurance. If the entity utilizes comercial (3rd party) PLI, submit an actuarial study only if one has been previously completed.
- 23 A Master Lease is required for all Mid-Sized and Large-Sized portfolios and for small portfolios with three or more properties and/or \$15 million or more in aggregate mortgage amount.

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